

# NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court for the Northern District of California

TO:	Richard Kirkland	Civil Action, File Number CV07-05423 VRW			
	California Dept. of Corrections & Rehabilitation Board of Parole Hearings	Arcadio S. Acuna			
	P.O. Box 4036	ν.			
	Sacramento, CA 95812-4036	Lea Ann Chrones, et al			
C	alifornia State law	to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and			
Y withi	ou MUST COMPLETE the acknowledgment part of this n 20 days. An envelope has been enclosed for this purp	s form below, AND RETURN COPIES AND 2 to the sender cose. Keep copy 3 for your records.			
corpo relati	oration, unincorporated association (including a partners)	MENT ON ALL COPIES. If you are served on behalf of a hip), or other entity, you must indicate under your signature your ner person and you are authorized to receive process, you must			
behal	you do not complete and return copies 1 and 2 of this fo f you are being served) may be required to pay any expere permitted by law.	rm to the sender within 20 days, you (or the party on whose enses incurred in serving a summons and complaint in any other			
answ		you (or the party on whose behalf you are being served) must nd/or 60 days for Federal defendants. If you fail to do so, emanded in the complaint.			
	leclare, under penalty of perjury, that this Notice and Acnailed on this date.	knowledgment of Receipt of Summons and Complaint By Mail			
Date o	Signature	Signature (USMS Official) - R. Jack Gush			
	ACKNOWLEDGMENT OF RECEIP	PT OF SUMMONS AND COMPLAINT			
		of the summons and of the complaint in the above captioned			
mann مرك	er at:	All . + 1 -			
15 Street	Number and Street Name or P.O. Box No.	Relationship to Entity/Authority to Receive			
5	A Francisco, CA 94102	5/19/0~			
City	State and Zip Code	Service of Process			
4	And A GO	5/19/08			
Signa	ture /	Date of Signature			

Copy 1 - Clerk of Court

Copy 2 - United States Marshals Service

Copy 3 - Addressee

Copy 4 - USMS District Suspense

SM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

# U.S. Department of Justice

United States Marshals Service

# PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Arcadio S. Acuna	COURT CASE NUMBER 3:07-5423 VRW
DEFENDANT DEFENDANT	DEVIALOR PROCESS 1 3: 57
Lea Ann Chrones	Order, Complaint, Summons
NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE	E OR DESCRIPTION OF PROPERTY TO SETZE OR CONDEMN
SERVE AT M. Ruff CDCR-Correctional Officer ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)	
CDCR-Office of Correctional Safety 2880 Sunrise Blvd.,Ste 1	30. Rancho Cordova, CA 95742 (attn. Everett Fischer)
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	
Arcadio S. Acuna ID# C-43165 Pelican Bay State Prison C-10-119 P.O.Box 7500	Number of parties to be
Crescent City, CA 95532	Check for service on U.S.A.
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDIT All Telephone Numbers, and Estimated Times Available for Service):	TING SERVICE (Include Business and Attentione Addresses.
An Telephone (vamoers, and Estimated Times Available for Service).	TO REPORT OF THE PROPERTY OF T
Full name could be Michael Ruff	PH 1: 12 DISTRICT
	P 8 7
	7 19
Signature of Attorney other Originator requesting service on behalf of:	TELEPHONE NUMBER DATE
Rhoue Wolfendan	NT 4/16/08
	OO NOT WRITE BELOW THIS LINE
l acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)  Total Process District of Origin Serve No	of Authorized USMS Deputy or Clerk  Date  1/2/08
hereby certify and return that I  have personally served, have legal evidence of services on the individual, company, corporation, etc., at the address shown above on the on the individual	
I hereby certify and return that I am unable to locate the individual, company, corporation, et	tc. named above (See remarks below)
Name and title of individual served (if not shown above)	A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date Time a
	Signature of U.S. Marshal or Deputy
Service Fee Total Mileage Charges including endeavors) Total Charges Advance D	Deposits Amount owed to U.S. Marshal* or (Amount of Refund*)
	\$0.00
FLIV/08 - Acknowledged Record	Dra
5/14/08 - Acknowledged Receipt	
PRINT 5 COPIES:  1. CLERK OF THE COURT 2. USMS RECORD 3. NOTICE OF SERVICE	PRIOR EDITIONS MAY BE USE

4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT

Form USM-285

Rev. 12/15/80 Automated 01/00



#### NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court for the Northern District of California

TO: M. Ruff, Correctional Officer	Civil Action, File Number CV07-05423 VRW
California Dept. of Corrections & Rehabilitation	Arcadio S. Acuna
Office of Correctional Safety 2880 Sunrise Boulevard, Suite 130	V.
Rancho, CA 95742	Lea Ann Chrones et al
Addition, Off 707 12	Darim Choles et al
	Z 00 c
The enclosed summons and complaint are served pursuant	to Rule 4(e)(1) of the Federal Rules of ChilProcedure, and
California State law.	
Vou MUST COMPLETE the calroyal adament next of this	form below AND RETURN CODIES HATD 2 19th a RETURN CODIES
You <u>MUST COMPLETE</u> the acknowledgment part of this within 20 days. An envelope has been enclosed for this purpose.	
within 20 days, in onvelope has seen enclosed for this purpo	ROS E SE
YOU MUST SIGN AND DATE THE ACKNOWLEDGM	
	ip), or other entity, you must indicate under your signature your er person and you are authorized to receive process, you must
indicate under your signature your authority.	er person and you are authorized to receive process, you must
	m to the sender within 20 days, you (or the party on whose
behalf you are being served) may be required to pay any expermanner permitted by law.	nses incurred in serving a summons and complaint in any other
matther permitted by law.	
	you (or the party on whose behalf you are being served) must
answer the complaint within 20 days for private defendants an	
judgment by default will be taken against you for the relief de	manded in the complaint.
	nowledgment of Receipt of Summons and Complaint By Mail
was mailed on this date.	
6/1/25	/ The P1 11 Common 1
7//00	for follow rocks, U. J. Thatse
Date of Signature	Signature (USMS Official)
	- Cheste
ACKNOWLEDGMENT OF RECEIP	Γ OF SUMMONS AND COMPLAINT
I declare, under penalty of perjury, that I received a copy of	f the summons and of the complaint in the above captioned
manner at:	
USE Cold ( to Ase	Afforman in First
Street Number and Street Name or P.O. Box No.	Relationship to Entity/Authority to Receive
C &	5/14/a/
	J/17/07
City State and Zip Code	Service of Process
Tringture	Date of Signature
orginature /	Date of Signature

Copy 1 - Clerk of Court

Copy 2 - United States Marshals Service

Copy 3 - Addressee

Copy 4 - USMS District Suspense

USM-285 IS a 3-part form. Fift out the form and print 5 copies. Sign as needed and route as specified below.

#### U.S. Department of Justice United States Marshals Service

# PROCESS RECEPT AND RETURN See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	(	13 AUGOORT CRIEND	MBER
Arcadio S. Acuna		3:07-5423 VRW	
DEFENDANT Lea Ann Chrones et al.	1	Order, Complain	SOUAT FREE MAN
	TO SERVE OR DES		<u> </u>
NAME OF INDIVIDUAL, COMPANY, CORPORATION. E	TC. TO SERVE OR DES	CRIPTION OF PROPERTY	TO SEIZE OR CONDEMN
SERVE M. Ruff - CDCR - Correctional Officer ADDRESS (Street or RFD, Apartment No., City, State and ZI	P Code)		
AT ADDRESS (Street or RFD, Apartment No., City, State and ZI 9838 Old Placeville Rd., Sacramento, CA 95827	, coucy		중 8 월
	BECC DELOW		유프 중 현
END NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADD		Number of process to be served with this Form 28	
		Served With this Form 20	A□ 6 日本
Arcadio S. Acuna ID# C-43165 Pelican Bay State Prison C-10-119		Number of parties to be	中 中 日 日 日 日 日 日 日 日 日 日 日 日 日
P.O. Box 7500		served in this case	100 S
Crescent City, CA 95532		Check for service	3: 2
		on U.S.A.	1 1 1 P
Signature of Attorney other Originator requesting service on behalf of:	<b>≥</b> PLAINTIFF	TELEPHONE NUMBER	DATE
Smore Male	DEFENDANT		4/7/08
SPACE BELOW FOR USE OF U.S. MARSHAL	ONLV DO NO	T WRITE RELO	W THIS LINE
acknowledge receipt for the total Total Process District of District to		ized USMS Deputy or Clerk	Date
number of process indicated. Origin Serve	F. 1		
Sign only for USM 285 if more han one USM 285 is submitted) No. No. No.		$\sim$	09//0/
hereby certify and return that I \( \sum \) have personally served, \( \sum \) have legal eviden the individual, company, corporation, etc., at the address shown above on the	ence of service, have on the individual, compa	executed as shown in "Rema ny, corporation, etc. shown a	rks", the process described t the address inserted below.
I hereby certify and return that I am unable to locate the individual, company	y, corporation, etc. named	above (See remarks below)	
Name and title of individual served (if not shown above)		, — ·	uitable age and discretion in defendant's usual place
Address (complete only different than shown above)		Date	Time
			□ a: □ p
		Signature of U.S.	Marshal or Deputy
ervice Fee Total Mileage Charges Forwarding Fee Total Charges	Advance Deposits	Amount owed to U.S. Ma	rshal* or
rgpo including endeavors)	6	(Amount of Refund*)	
OF July 1		\$0	.00
EMARKS: 3/1/08- Mittled Summon W/2	- was by	ies	
3/14/08 Acknowledged Receipt			
PRINT 5 COPIES: 1. CLERK OF THE COURT 2. USMS RECORD		PRIO	R EDITIONS MAY BE USE
3. NOTICE OF SERVICE			F 1101
<ol> <li>BILLING STATEMENT*: To be returned to the U.S. N</li> </ol>	narshai with payment,		Form USN Rev. 12



### NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court for the Northern District of California

TO: M. Ruff, Correctional Officer	Civil Action, File Number CV07-05423 VRW
California Dept. of Corrections & Rehabilitation	Arcadio S. Acuna
Office of Correctional Safety	v.
2880 Sunrise Boulevard, Suite 130 Rancho, CA 95742	Lea Ann Chrones et al
Teations, CIT 757 (2	Dog Film Ontolise of the
	form below, AND RETURN COPIES AND 2 to the sender ose. Keep copy 3 for your records.
behalf you are being served) may be required to pay any expermanner permitted by law.	m to the sender within 20 days, you (or the party on whose uses incurred in serving a summons and complaint in any other
If you do complete and return copies 1 and 2 of this form, y answer the complaint within 20 days for private defendants an judgment by default will be taken against you for the relief default.	
I declare, under penalty of perjury, that this Notice and Ackwas mailed on this date.	knowledgment of Receipt of Summons and Complaint By Mail
Date of Signature	Signature (USMS Official) - R GAKSON, Clesh
ACKNOWLEDGMENT OF RECEIP	Γ OF SUMMONS AND COMPLAINT
I declare, under penalty of perjury, that I received a copy of manner at:	f the summons and of the complaint in the above captioned
455 Golden Gate Ave Street Number and Street Name or P.O. Box No.	Afformey in Fact Relationship to Entity/Authority to Receive
Sa Francisco, CA 94102	5/14/04
City State and Zip Code	Service of Process
Signature Signature	Date of Signature
· /	-

Copy 1 - Clerk of Court

Copy 2 - United States Marshals Service

Copy 3 - Addressee

Copy 4 - USMS District Suspense

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice

# PROCESS RECEIPT AND RETURN

United States Marshals Service See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Arcadio S. Acuna	COURT CASE NUMBER
DEFENDANT	TYPE OF PROCESS 11 3: 57
Lea Ann Chrones et al.	Order, Complaint, Summons
NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SER	
SERVE J. Garcilazo -LAC Correctional Officer	The cath and
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)	
44750 60th St. W, Lancaster, CA 93536	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELO	Number of process to be served with this Form 285
Arcadio S. Acuna 1D# C-43165 Pelican Bay State Prison C-10-119 P.O. Box 7500	Number of parties to be served in this case
Crescent City, CA 95532	Check for service on U.S.A.
Signature of Atternay with Originature convention continue on habits of	PH 3: 18 PH A: 18 PH
Signature of Attorney other Originator requesting service on behalf of:  PLAINTI  DEFEND	lrr
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY	DO NOT WRITE BELOW THIS LINE
l acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)  Total Process District of Origin Serve No	re of Authorized USMS Deputy or Clerk Date
I hereby certify and return that I $\square$ have personally served, $\square$ have legal evidence of service on the individual, company, corporation, etc., at the address shown above on the on the individual.	have executed as shown in "Remarks", the process described dual, company, corporation, etc. shown at the address inserted below.
☐ I hereby certify and return that I am unable to locate the individual, company, corporation	s, etc. named above (See remarks below)
Name and title of individual served (if not shown above)	A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date Time arr
	Signature of U.S. Marshal or Deputy
including endeavors)	Amount owed to U.S. Marshal* or (Amount of Refund*)  \$0.00
REMARKS: 3/1/08. Marted Rummons w/299 For 3/19/08 - Acknowledged Receipt	prR.Ja
PRINT 5 COPIES: 1. CLERK OF THE COURT 2. USMS RECORD	PRIOR EDITIONS MAY BE USEI

3. NOTICE OF SERVICE

4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal. 5. ACKNOWLEDGMENT OF RECEIPT





# NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court for the Northern District of California

TO: J. Garcilazo - LAC Correctional Officer	Civil Action, File Number CV07-05423 VRW				
California State Prison - LAC 44750 60TH Street, West	Arcadio S. Acuna				
Lancaster, CA 93536	ν.				
	Lea Ann Chrones et al				
The enclosed summons and complaint are served pursuant California State law.  You MUST COMPLETE the acknowledgment part of this within 20 days. An envelope has been enclosed for this purp	ose. Keep copy 3 for your records.				
corporation, unincorporated association (including a partnersh	IENT ON ALL COPIES. If you are served on belieff of a final hip), or other entity, you must indicate under your signature injuries person and you are authorized to receive process, you must				
If you do not complete and return copies 1 and 2 of this form to the sender within 20 days, you (or the party on whose behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.					
If you do complete and return copies 1 and 2 of this form, yanswer the complaint within 20 days for private defendants an judgment by default will be taken against you for the relief de					
I declare, under penalty of perjury, that this Notice and Aclawas mailed on this date.	knowledgment of Receipt of Summons and Complaint By Mail				
Date/of Signature	for Federico Rocha U.S. Marsh Signature (USMS Official) f. Jank Girls				
ACKNOWLEDGMENT OF RECEIP	T OF SUMMONS AND COMPLAINT				
	f the summons and of the complaint in the above captioned				
Street Number and Street Name or P.O. Box No.  Son Francisco, (A 94102  City, State and Zip Code  Signature	Afformer in Fact Relationship to Entity/Authority to Receive  5/19/08  Service of Process  5/14/08  Date of Signature				

Copy 1 - Clerk of Court Copy 2 - United States Marshals Service Copy 3 - Addressee Copy 4 - USMS District Suspense

# U.S. Department of Justice

United States Marshals Service

# PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	COURT CASE NUM	IBER
Arcadio S. Acuna	(13:87)54237VRW	3-59 = 5
DEFENDANT	TYPE OF PROCESS	O B A
Lea Ann Chrones et al.	Order, Complaint	Summons 3
NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE OR DES	CRIPTION OF PROPERTY	O SEIZE OR GONDEMN
SERVE J Richard Kirkland -PBSP - Former Acting Warden of PBSP		<u>P</u>
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)		<u>G</u> □ <del>Z</del> ≤
9838 Old Placeville Rd., Sacramento, CA 95827		필입 49 월
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285	P 6 2 8
Arcadio S. Acuna ID# C-43165 Pelican Bay State Prison C-10-119 P.O. Box 7500	Number of parties to be served in this case	
Crescent City, CA 95532	Check for service on U.S.A.	
All Telephone Numbers, and Estimated Times Available for Service):  d		Fold
Signature of Attorney other Originator requesting service on behalf of:    T   PI AINTIEF   T	'ELEPHONE NUMBER	DATE
	EEEFHONE NOMBER	
SIMOUS 18 LI DEFENDANT		4/7/08
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO NO	T WRITE BELOV	V THIS LINE
I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)  I acknowledge receipt for the total number of process indicated. Origin  District to Serve No. 1	zed USMS Deputy or Clerk	Date 04/0/
I hereby certify and return that I \( \sum_{\text{have personally served}} \), \( \sum_{\text{have legal evidence of service}} \), \( \sum_{\text{have and have endown above on the on the individual}} \), company, corporation, etc., at the address shown above on the on the individual, company	executed as shown in "Remar ny, corporation, etc. shown at	ks", the process described the address inserted below.
☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named	above (See remarks below)	
Name and title of individual served (if not shown above)	☐ A person of su	itable age and discretion n defendant's usual place
Address (complete only different than shown above)	Date	Time an
		pn.
	Signature of U.S. N	
Service Fee Total Mileage Charges Forwarding Fee Total Charges Advance Deposits including endeavors)	Signature of U.S. Mars (Amount owed to U.S. Mars (Amount of Refund*)	Marshal or Deputy
	Amount owed to U.S. Mars (Amount of Refund*)	Marshal or Deputy
	Amount owed to U.S. Mars	hal* or
including endeavors)	Amount owed to U.S. Mars (Amount of Refund*)	Marshal or Deputy

BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
 ACKNOWLEDGMENT OF RECEIPT

USM-285 is a 5-part form. Fiff out the form and print 5 copies. Sign as needed and route as specified below.

#### U.S. Department of Justice United States Marshals Service

### PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

						**	,		
PLAINTIFF						COURT CASE NU	MBER		
Arcadio S. Acuna					n	3407-5423 VRW			
DEFENDANT			TYPE OF PROCESS						
Lea Ann Chrones et al.				Order, Complain	ıt; Summo	ns			
NAME OF INDI	IVIDUAL, COM	IPANY, CO	RPORATION. ET	C. TO SERVE OR D	ESCRIPT	ION OF PROPERTY	TO SEIZE	OR CON	1DEMN
SERVE Richard Kirkl			cting Warden City, State and ZIP	Code					
***	-			City , CA 95531					
END NOTICE OF SERVICE COP	Y TO REQUES	TER AT N	AME AND ADDR	ESS BELOW	Nur	nber of process to be			<del></del>
						ed with this Form 28		9	CZ
Arcadio S. Acuna	ID# C-431	65					<b>□</b>		
Pelican Bay State						nber of parties to be '	뉴플	APR	$\Xi$
P.O. Box 7500					Serv	ed iii tiiis case	OH.	٠.	$\odot$
Crescent City, CA	95532				Che	ck for service	<b>P</b> 33	9	3
						J.S.A.	开言	~0	33
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SPECIAL INSTRUCTIONS OR O' All Telephone Numbers, and Estin				IN EXPEDITING S	ERVICE	Include Business an	Alterhate	<u>Addresse</u>	<u>क्र के</u>
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								_	1
gnature of Attorney other Originat	or requesting se	rvice on beh	alf of:	PLAINTIFF	TELEPH	ONE NUMBER	DATE	,	
-b. \la	1			DEFENDANT			4/7/	08	
SPACE BELOW FOI	R LISE OF	IIS M	ARSHAL O	NLV DO N	OT W	RITE BELO			E.
acknowledge receipt for the total	Total Process	District of	District to			MS Deputy or Clerk	*** 1111	Date	
umber of process indicated.  Sign only for USM 285 if more	1	Origin //	Serve	1111	/			\ \alpha_{\alpha}.	1
an one USM 285 is submitted)		No. //	_ No./	IN				9	100/
hereby certify and return that I	have personally	served,  address sho	have legal eviden	ce of service, hav	e execute	d as shown in "Rema poration, etc. shown a	rks", the pro	cess des	cribed below.
I hereby certify and return that	I am unable to lo	cate the ind	ividual, company,	corporation, etc. name	ed above (	See remarks below)			
lame and title of individual served (	(if not shown abo	ove)				A person of s then residing of abode			
Address (complete only different tha	n shown above)					Date	Time		
						Signature of U.S.	Marshal or I	Deputy	
			T	The		2. 7:0 1	. 14		
ervice Fee Total Mileage Clincluding endean		ling Fee	Total Charges	Advance Deposits		unt owed to U.S. Mai ount of Refund*)	rshai* or		
2,						\$0	.00		
EMARKS: 5/1/08-MAI	Ted u	1299	Form	- Agua					
5/19/08- Lek	milel.	و لاه	Rossia	+ RA		Applicate: Posts			
PRINT 5 COPIES: 1. CLERK OF	THE COURT				-	PRIO	R EDITION	IS MAY	BE US

3. NOTICE OF SERVICE

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United States District Court for the Northern District of California

TO:	Richard Kirkland	Civil Action, File Number CV07-05423 VRW
	California Dept. of Corrections & Rehabilitation Board of Parole Hearing*	Arcadio S. Acuna
	P.O. Box 4036	ν.
	Sacramento, CA 95812-4036	Lea Ann Chrones, et al
		- o G
Th Ca	e enclosed summons and complaint are served pursuant to Ralifornia State law.	ule 4(e)(1) of the Federal Rules of Civil Procedure, and
	ou MUST COMPLETE the acknowledgment part of this form 20 days. An envelope has been enclosed for this purpose.	
corpo relatio	DU MUST SIGN AND DATE THE ACKNOWLEDGMENT ration, unincorporated association (including a partnership), onship to that entity. If you are served on behalf of another pate under your signature your authority.	or other entity, you must indicate under wur signature your
behal	you do not complete and return copies 1 and 2 of this form to f you are being served) may be required to pay any expenses er permitted by law.	
answe	you do complete and return copies 1 and 2 of this form, you ear the complaint within 20 days for private defendants and/or nent by default will be taken against you for the relief deman	60 days for Federal defendants. If you fail to do so,
	eclare, under penalty of perjury, that this Notice and Acknownailed on this date.	vledgment of Receipt of Summons and Complaint By Mail
Date o	f Signature	Signature (USMS Official) - R. Jacon Guiland
	ACKNOWLEDGMENT OF RECEIPT OF	F SUMMONS AND COMPLAINT
I d	eclare, under penalty of perjury, that I received a copy of the	summons and of the complaint in the above captioned
nann		111 . + 1
	Number and Street Name or P.O. Box No.	Attorney in Fact Relationship to Entity/Authority to Receive
<u> </u>		5/19/08
City. S	State and Zip Code	Service of Process
	mel IFC	5/19/08
Signa	ure /	Date of Signature

Copy 1 - Clerk of Court

Copy 2 - United States Marshals Service

Copy 3 - Addressee

Copy 4 - USMS District Suspense

Filed 08/07/2008 Page 11 of 20

UGM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

#### U.S. Department of Justice United States Marshals Service

# PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Arcadio S. Acuna	COURT CASE NUMBERS: 50
DEFENDANT Lea Ann Chrones et al.	Order, Complaint, Summons
NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE O	
4	R DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
SERVE Lea Ann Chrones - CDCR  ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)	<del>2 8 8</del>
9838 Old Placeville Rd. , Sacramento, CA 95827	무극 공 등
END NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285
,	
Arcadio S. Acuna ID# C-43165	Number of parties to be
Pelican Bay State Prison C-10-119 P.O. Box 7500	served in this case
Crescent City, CA 95532	Number of parties to be served in this case  Check for service
	on U.S.A.
ignature of Attorney other Originator requesting service on behalf of:	TELEPHONE NUMBER DATE
DEFENDANT	4/7/08
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO	NOT WRITE RELOW THIS LINE
	Authorized USMS Deputy or Clerk Date
Sign only for USM 285 if more	-IM
nan one USM 285 is submitted) No No No	04/16
hereby certify and return that I $\square$ have personally served, $\square$ have legal evidence of service, $\square$ in the individual, company, corporation, etc., at the address shown above on the on the individual,	
I hereby certify and return that I am unable to locate the individual, company, corporation, etc.	named above (See remarks below)
ame and title of individual served (if not shown above)	A person of suitable age and discretion then residing in defendant's usual place of abode
ddress (complete only different than shown above)	Date Time an
	Signature of U.S. Marshal or Deputy
Total Mileage Charges including endeavors)  Forwarding Fee Total Charges Advance Department of the Charges including endeavors Total Charges Including endeavors	osits Amount owed to U.S. Marshal* or (Amount of Refund*)
0,- 0,	\$0.00
EMARKS: \$6/08-model hummond w/290 For	m. Lya
RINTS COPIES: 1. CLERK OF THE COURT	PRIOR EDITIONS MAY BE USE
2. USMS RECORD	TRIOR EDITIONS MAY BE USE.

3. NOTICE OF SERVICE
4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment,

if any amount is owed. Please remit promptly payable to U.S. Marshal. 5. ACKNOWLEDGMENT OF RECEIPT



# NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court for the Northern District of California

TO: Lea Ann Chrones	Civil Action, File Number CV07-05423
California Dept. of Corrections & Rehabilitation P.O. Box 4036	Arcadio S. Acuna
Sacramento, CA 95812-4036	ν.
,	Lea An Chrones
	무취 등 명
The enclosed summons and complaint are served pursua California State law.	ant to Rule 4(e)(1) of the Federal Rules of Five Procedure, and
Camornia State law.	
You MUST COMPLETE the acknowledgment part of the	nis form below, AND RETURN COPIEST AND 2 the sender
within 20 days. An envelope has been enclosed for this pu	rpose. Keep copy 3 for your records. 与丑 📅
YOU MUST SIGN AND DATE THE ACKNOWLEDG	GMENT ON ALL COPIES. If you are served on beful of a
corporation, unincorporated association (including a partner	rship), or other entity, you must indicate under your signature your
	other person and you are authorized to receive process, you must
indicate under your signature your authority.	
If you do not complete and return copies 1 and 2 of this	form to the sender within 20 days, you (or the party on whose
	penses incurred in serving a summons and complaint in any other
manner permitted by law.	
If you do complete and return copies 1 and 2 of this form	n, you (or the party on whose behalf you are being served) must
	and/or 60 days for Federal defendants. If you fail to do so,
judgment by default will be taken against you for the relief	demanded in the complaint.
I declare, under penalty of perjury, that this Notice and A	Acknowledgment of Receipt of Summons and Complaint By Mail
was mailed on this date.	
The La	1 (talinis Santa Il mall
Dela at Signatura	Signature (USMS Official) De L. Civil
Date of Signature	Signature (USIMS Official)
	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
ACKNOWLEDGMENT OF RECE	IPT OF SUMMONS AND COMPLAINT
I declare, under penalty of perjury, that I received a copy	of the summons and of the complaint in the above captioned
manner at:	
455 Golden Gate Ave	Afterner in Fact
Street Number and Street Name or P.O. Box No.	Relationship to Entity/Authority to Receive
Son Francisco CA 94102	6/4/08
City state and Zip Code	Service of Process
(hell at	614/08
Signature	Date of Signature

Copy 1 - Clerk of Court

Copy 2 - United States Marshals Service

Copy 3 - Addressee

Copy 4 - USMS District Suspense

Case 3:07-cv-05423-VRW Document 29-2 Filed 08/07/2008 Page 13 of 20 USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice United States Marshals Service

### PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	COURT CASE NUMI	BER
Arcadio S. Acuna	18 187-5423 VRW3	: 57
DEFENDANT	TYPE OF PROCESS	
Lea Ann Chrones et al.	Order, Complaint,	OCCURA
NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE OR DESCRI	RIPTION OF PROPERTY T	O SEIZE OR CONDEMN
SERVE J J.S. Woodford - CDCR - Former Director		
AT ADDRESS (Street or RFD, Apartment No., City, State and 2IP Code)		
9838 Old Placeville Rd., Sacramento, CA 95827		7 O C
END NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be	OB API
	served with this Form 285	
Arcadio S. Acuna ID# C-43165	Number of nortice to be	RO I
Pelican Bay State Prison C-10-119	Number of parties to be served in this case	
P.O. Box 7500		
Crescent City, CA 95532	Check for service on U.S.A.	
		-9 PM 3: 11 ERN DISTRIC
PECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERV III Telephone Numbers, and Estimated Times Available for Service):	ICE (Include Business and	Alternate Addresses.
constitute of Attorney other Originator requesting carries on babelli of	LEDUONIE NII (MDED	DATE
PLAINTIFF	LEPHONE NUMBER	DATE
Divine Defendant		4/7/08
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO NOT	WRITE BELOW	THIS LINE
acknowledge receipt for the total umber of process indicated.  Total Process District of District to Signature of Authorize Origin Serve	d USMS Deputy or Clerk	Date
Sign only for USM 285 if more		m/n
nan one USM 285 is submitted) No. 1 No. 1		
hereby certify and return that I $\square$ have personally served, $\square$ have legal evidence of service, wave exensus the individual, company, corporation, etc., at the address shown above on the on the individual, company		
I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named ab		
ame and title of individual served (if not shown above)		table age and discretion
	then residing in	defendant's usual place
ddress (complete only different than shown above)	Of abode Date	Time
address (complete only different than shown above)	Date	1 ime
	Signature of U.S. M	farshal or Deputy
revice Fee Total Mileage Charges including endeavors) Total Charges Advance Deposits	Amount owed to U.S. Marsh (Amount of Refund*)	aal* or
Sy or	£0.0	10
THE PER STATE OF THE PE	\$0.0	
EMAKKS: 0/6/06. MARGO Summer w/299 Form		
5/19/08-Acknowledged Recipt		
REMARKS: 0/6/08, MAIled Summer w/299 From		

3. NOTICE OF SERVICE

4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT

# Fill out form and print 4 copies. Sign and date all copies and route as specified below. See 3:07-cv-05423-VRW Document 29-2 Filed 08/07/2008 Page 14 of 20 Case 3:07-cv-05423-VRW

U.S. Department of Justice



United States Marshals Service

#### NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court for the Northern District of California

TO: J. S. Woodford California Department of Corrections & Rehabilitation P.O. Box 942883 Sacramento, CA 94283-0001  The enclosed summons and complaint are served pursuant to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and California State law.  You MUST COMPLETE the acknowledgment part of this form below, AND RETURN COPIES 1 AND 2 to the sender within 20 days. An envelope has been enclosed for this purpose. Keep copy 3 for your records.  YOU MUST SIGN AND DATE THE ACKNOWLEDGMENT ON ALL COPIES. If you are served process, you instantiate under your signature your authority.  If you do not complete and return copies 1 and 2 of this form to the sender within 20 days, you (or the party on whose behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.  If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.  If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.  I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.  Fight Standard (USMS Official)  Fight Complete and Complaint By Mail was mailed on this date.  Fight Standard (USMS Official)
P.O. Box 942883 Sacramento, CA 94283-0001  The enclosed summons and complaint are served pursuant to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and California State law.  You MUST COMPLETE the acknowledgment part of this form below, AND RETURN COPIES 1 AND 210 the sender within 20 days. An envelope has been enclosed for this purpose. Keep copy 3 for your records.  YOU MUST SIGN AND DATE THE ACKNOWLEDGMENT ON ALL COPIES. If you are served to be that of a partnership), or other entity, you must indicate under you signature your relationship to that entity. If you are served on behalf of another person and you are authorized to receive process, you write indicate under your signature your authority.  If you do not complete and return copies 1 and 2 of this form to the sender within 20 days, you (of the party on whose behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.  If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.  I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.  Fight By Balt of Signature  Signature (USMS Official)  Signature (USMS Official)
The enclosed summons and complaint are served pursuant to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and California State law.  You MUST COMPLETE the acknowledgment part of this form below, AND RETURN COPIES 1 AND 210 the sender within 20 days. An envelope has been enclosed for this purpose. Keep copy 3 for your records.  YOU MUST SIGN AND DATE THE ACKNOWLEDGMENT ON ALL COPIES. If you are served on betalf of an encorporation, unincorporated association (including a partnership), or other entity, you must indicate the process, you must indicate under your signature your authority.  If you do not complete and return copies 1 and 2 of this form to the sender within 20 days, you (or the party on whose behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.  If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.  I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.  Signature (USMS Official)  Signature (USMS Official)
The enclosed summons and complaint are served pursuant to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and California State law.  You MUST COMPLETE the acknowledgment part of this form below, AND RETURN COPIES 1 AND 2 to the sender within 20 days. An envelope has been enclosed for this purpose. Keep copy 3 for your records.  YOU MUST SIGN AND DATE THE ACKNOWLEDGMENT ON ALL COPIES. If you are served on behalf of a partnership), or other entity, you must indicate under your signature your indicate under your signature your authority.  If you do not complete and return copies 1 and 2 of this form to the sender within 20 days, you (or party on whose behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.  If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.  I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.  Fully Rodrigue (USMS Official)
You MUST COMPLETE the acknowledgment part of this form below, AND RETURN COPIES 1 AND 2 to the sender within 20 days. An envelope has been enclosed for this purpose. Keep copy 3 for your records.  YOU MUST SIGN AND DATE THE ACKNOWLEDGMENT ON ALL COPIES. If you are served on behalf of an envelope as corporation, unincorporated association (including a partnership), or other entity, you must indicate under your signature; your relationship to that entity. If you are served on behalf of another person and you are authorized to receive process, you in this indicate under your signature your authority.  If you do not complete and return copies 1 and 2 of this form to the sender within 20 days, you (or the party on whose behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.  If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.  I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.  The Law Rockey U.S. Marshyll Signature (USMS Official) A. Marshyll Signature (USMS Official)
Within 20 days. An envelope has been enclosed for this purpose. Keep copy 3 for your records.  YOU MUST SIGN AND DATE THE ACKNOWLEDGMENT ON ALL COPIES. If you are served on behalf of another person and you are authorized to receive process, you must indicate under your signature your relationship to that entity. If you are served on behalf of another person and you are authorized to receive process, you must indicate under your signature your authority.  If you do not complete and return copies 1 and 2 of this form to the sender within 20 days, you (or the party on whose behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.  If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.  I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.  Figure (USMS Official)  Signature (USMS Official)  Signature (USMS Official)
corporation, unincorporated association (including a partnership), or other entity, you must indicate under your signature your relationship to that entity. If you are served on behalf of another person and you are authorized to receive process, you must indicate under your signature your authority.  If you do not complete and return copies 1 and 2 of this form to the sender within 20 days, you (or the party on whose behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.  If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.  I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.  Follows  Signature (USMS Official)  Follows  Signature (USMS Official)
behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.  If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.  I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.  The land of Signature (USMS Official) of Signature (USMS Offici
answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.  I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.  Televis Rocks, U.S. Marshal  Signature (USMS Official)  Signature (USMS Official)
Was mailed on this date.  5/6/8  Date of Signature  Signature (USMS Official)  Signature (USMS Official)  Signature (USMS Official)
ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT
I declare, under penalty of perjury, that I received a copy of the summons and of the complaint in the above captioned manner at:
Street Number and Street Name or P.O. Box No.  Attorney in Fact Relationship to Entity/Authority to Receive
San Francisco, CA 1410> 5/19/08
City, State and Zip Code Service of Process
Signature Date of Signature

Copy 1 - Clerk of Court

Copy 2 - United States Marshals Service

Copy 3 - Addressee

Copy 4 - USMS District Suspense

USM-285 is a 5-part form. Sign as needed and route as specified below. Fill out the form and print 5 copies.

## U.S. Department of Justice

United States Marshals Service

#### PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal" **PLAINTIFF** Arcadio S. Acuna DEFENDANT TYPE OF PROCESS Lea Ann Chrones et al. Order, Complaint, Summons NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Alameida - CDCR - Former Director SERVE ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 9838 Old Placeville Rd., Sacramento, CA 95827 SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Number of process to be 1 served with this Form 285 Arcadio S. Acuna ID# C-43165 Number of parties to be Pelican Bay State Prison C-10-119 served in this case P.O. Box 7500 Crescent City, CA 95532 Check for service on U.S.A SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and lternate All Telephone Numbers, and Estimated Times Available for Service): Fold Signature of Attorney other Originator requesting service on behalf of: TELEPHONE NUMBER DATE PLAINTIFF □ DEFENDANT 4/7/08 SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE Total Process District of District to Signature of Authorized USMS Deputy or Clerk I acknowledge receipt for the total Date number of process indicated. Origin Serve (Sign only for USM 285 if more than one USM 285 is submitted) I hereby certify and return that I 🗌 have personally served, 🔲 have legal evidence of service. Thave executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below. I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below) Name and title of individual served (if not shown above) A person of suitable age and discretion then residing in defendant's usual place of abode Address (complete only different than shown above) Date Time Signature of U.S. Marshal or Deputy Total Mileage Charges Amount owed to U.S. Marshal\* or Service Fee Forwarding Fee Total Charges Advance Deposits including endeavors) (Amount of Refund\*) \$0.00 REMARKS

CLERK OF THE COURT

USMS RECORD

3. NOTICE OF SERVICE

4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED



#### NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court for the Northern District of California

TO: E. Alameida	Civil Action, File Number CV07-05423
California Department of Corrections & Rehabilitation P.O. Box 942883 Sacramento, CA 94283-0001	Arcadio S. Acuna
	ν.
	Lea An Chrones
The enclosed summons and complaint are served pursuant California State law.	t to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and
You <u>MUST COMPLETE</u> the acknowledgment part of this within 20 days. An envelope has been enclosed for this purp	s form below, <u>AND RETURN COPIES 1 AND 2</u> to the sender cose. Keep copy 3 for your records.
corporation, unincorporated association (including a partners	MENT ON ALL COPIES. If you are served on behalf of a hip), or other entity, you must indicate under your grantine your her person and you are authorized to recover process, you must
If you do not complete and return copies 1 and 2 of this fo behalf you are being served) may be required to pay any exper manner permitted by law.	orm to the sender within 20 days, you the party on whose enses incurred in serving a summons and complaint in any other
If you do complete and return copies 1 and 2 of this form, answer the complaint within 20 days for private defendants at judgment by default will be taken against you for the relief default.	
I declare, under penalty of perjury, that this Notice and Acwas mailed on this date.	knowledgment of Receipt of Summons and Complaint By Mail
5/6/08	La Felerica Rocks U.S. Marchel
Date of Signature	for Federica Rocks, U.S. Marshal Signature (USMS Official) - Darch Check
ACKNOWLEDGMENT OF RECEIP	PT OF SUMMONS AND COMPLAINT
I declare, under penalty of perjury, that I received a copy of manner at:	of the summons and of the complaint in the above captioned
455 Golden Gate Ave	Attornerintact
Street Number and Street Name or P.O. Box No.	Relationship to Entity/Authority to Receive
San Francisco, CA 94102	3/19/08
City, State and Zip Code	Service of Process
Signature T	Date of Signature

Copy 1 - Clerk of Court Copy 2 - United States Marshals Service Copy 3 - Addressee Copy 4 - USMS District Suspense

USM-265 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

United States Marshala Service	CIPT AND RETURN  ice of Process by U.S. Marshal"
PLAINTIFF	COURT CASE NUMBER
Arcadio S. Acuna	-3:07-5423:VRW
DEFENDANT 90 RUG	TYPE OF PROCESS
Lea Ann Chrones et al.	Order, Complaint, Summons
NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE OR DESCRIP	TION OF PROPERTY TO SEIZE OR CONDEMN
SERVE J N. Grannis - CDCR - Chief, Inmate Appeals Branch	
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)	
9838 Old Placeville Rd., Sacramento, CA 95827	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	imber of process to be
	rved with this Form 285
Arcadio S. Acuna ID# C-43165	
Delicen Pay State Prison C 10 110	Imber of parties to be ved in this case
P.O. Box 7500	To in this case
	eck for service
on	U.S.A.
All Telephone Numbers, and Estimated Times Available for Service):  Signature of Attorney other Originator requesting service on behalf of:  DEFENDANT  SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO NOT W.	ORTHES VIVESHAL ONE NUMBER APR -9 PH 32 278 HALL OF CALIFORNIA AVERTAGE VIVESHAL ONE NUMBER AVERTAGE VIVESHAL OF CALIFORNIA AVERTAGE VIVESHALL OF CALIFORNIA AVERTAGE
I acknowledge receipt for the total Total Process District of District to Signature of Authorized US	SMS Deputy or Clerk Date
number of process indicated. (Sign only for USM 285 if more	1/1/2
than one USM 285 is submitted) No. No. No. No. No.	4/14/08
hereby certify and return that I \( \sum \) have personally served, \( \sum \) have legal evidence of service, \( \sum \) have execute on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc., at the address shown above on the on the individual.	ed as shown in "Remarks", the process described poration, etc. shown at the address inserted below.
☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above	(See remarks below)
Name and title of individual served (if not shown above)	A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date Time
, , , , , , , , , , , , , , , , , , , ,	an
	□ рп
	Signature of U.S. Marshal or Deputy
	ount owed to U.S. Marshal* or
	ount owed to U.S. Marshal* or nount of Refund*)

- PRINT 5 COPIES:

  1. CLERK OF THE COURT
  2. USMS RECORD
  3. NOTICE OF SERVICE

  - 4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
    5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED



# NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court for the Northern District of California

TO: N. Grannis	Civil Action, File Number CV07-05423 VRW
California Department of Corrections & Rehabilitation	Arcadio S. Acuta
Inmate Appeals Branch	
P.O. Box 942883	v. 9₽ ★ ₽
Sacramento, CA 94283-0001	Lea Ann Chrones 222
The second secon	
The enclosed summons and complaint are served pursuan California State law.	t to Rule 4(e)(1) of the Federal Rules of Evil Procedure, and
Camornia State law.	
You MUST COMPLETE the acknowledgment part of this within 20 days. An envelope has been enclosed for this purp	s form below, AND RETURN COPIES 1 AND 2 to the sender pose. Keep copy 3 for your records.
	MENT ON ALL COPIES. If you are served on behalf of a
	hip), or other entity, you must indicate under your signature your her person and you are authorized to receive process, you must
indicate under your signature your authority.	nor person and you are auditorized to receive process, you must
, , , ,	
	orm to the sender within 20 days, you (or the party on whose
manner permitted by law.	enses incurred in serving a summons and complaint in any other
mainer permitted by law.	
If you do complete and return copies 1 and 2 of this form, answer the complaint within 20 days for private defendants a judgment by default will be taken against you for the relief default will be taken against your will be taken	
The first of the control of the cont	described to the Control of the Cont
was mailed on this date.	cknowledgment of Receipt of Summons and Complaint By Mail
=/./4	
2/1/08	for Federica Kocha U. & March
Date of Signature	Signature (USMS Official) Land Cy
	1 1 1 221
ACKNOWLEDGMENT OF RECEIF	PT OF SUMMONS AND COMPLAINT
	of the summons and of the complaint in the above captioned
manner at:	A11 . T !
455 Golden Gate Ave	Attorney intact
Street Number and Street Name or P.O. Box No.	Relationship to Entity/Authority to Receive
San Francisco, (A 94102	5/14/08
City State and Zip Code	Service of Process
(1.11)	5/14/08
Signature	Date of Signature
, and a second s	5

Copy 1 - Clerk of Court

Copy 2 - United States Marshals Service

Copy 3 - Addressee

Copy 4 - USMS District Suspense

LSM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

# U.S. Department of Justice

United States Marshals Service

### PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S.

PLAINTIFF	COURT CASE NUME	BER
Arcadio S. Acuna	3:07-5423 VRW	7 PM 3:58
DEFENDANT	TYPE OF PROCESS	11110
Lea Ann Chrones et al.	Order, Complaint,	Summons (Co
NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE OR DESC	RIPTION OF PROPERTY T	SEIZE OR CONDEMN
SERVE N. Grannis - CDCR- Chief, Inmate Appeals Branch		
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)		
CDCR- Inmate Appeals Branch attn.:Lori Zamora - Lit. Coordinator, P.	O. Box 942883, Sacram	ento,CA 94283-0001
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be	
	served with this Form 285	1
Arcadio S. Acuna ID # C-43165	Number of parties to be	
Pelican Bay State Prison C-10-119	served in this case	
P.O.Box 7500 Crescent City, CA 95532		
Croscent City, Crt 75552	Check for service on U.S.A.	
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERV All Telephone Numbers, and Estimated Times Available for Service):	ICE (Include Business and A	<u>llternate Addresses,</u>
d		≥ S Fold (
<del>-</del>		$\sim$
		#PR
		ALFO
Signature of Attorney other Originator requesting service on behalf of:    E   PLAINTIFF   TE	LEPHONE NUMBER	
DEFENDANT DEFENDANT		<b>耐</b> 6/08 <u></u>
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO NOT	WRITE BELOW	THIS LINE
l acknowledge receipt for the total   Total Process   District of   District to   Signature of Authorize	ed USMS Deputy or Clerk	Date
number of process indicated. (Sign only for USM 285 if more)  Origin  Serve		5 1/1/6
than one USM 285 is submitted) No. No. No.	And the state of t	<u> </u>
I hereby certify and return that I \( \subseteq \text{have personally served }, \subseteq \text{have legal evidence of service, } \subseteq \text{have exist}	ecuted as shown in "Remarks	" the process described
on the individual, company, corporation, etc., at the address shown above on the individual, company	, corporation, etc. shown at the	e address inserted below.
I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named ab	oove (See remarks below)	
Name and title of individual served (if not shown above)	A person of suit	able age and discretion
,		defendant's usual place
	of abode	
Address (complete only different than shown above)	Date	Time ar
		☐ pr
	Signature of U.S. M	arshal or Deputy
	Signature of U.S. Ma	arshal or Deputy
Service Fee Total Mileage Charges Forwarding Fee Total Charges Advance Denosits		
Service Fee Total Mileage Charges   Forwarding Fee Total Charges   Advance Deposits	Amount owed to U.S. Marsh (Amount of Refund*)	
	Amount owed to U.S. Marsh (Amount of Refund*)	al* or
f & concluding endeavors)	Amount owed to U.S. Marsh	al* or
	Amount owed to U.S. Marsh (Amount of Refund*)	al* or
f & concluding endeavors)	Amount owed to U.S. Marsh (Amount of Refund*)	al* or
f & concluding endeavors)	Amount owed to U.S. Marsh (Amount of Refund*)	al* or

4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal. 5. ACKNOWLEDGMENT OF RECEIPT



### NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court for the Northern District of California

	Civil Assissa Pile Namber CVOT 05422 VIDW
TO: N. Grannis California Department of Corrections & Rehabilitation Inmate Appeals Branch	Civil Action, File Number CV07-05423 VRW  Arcadio S. Acuna
P.O. Box 942883	ν.
Sacramento, CA 94283-0001	Lea Ann Chrones
The enclosed summons and complaint are served pursuant to California State law.  You MUST COMPLETE the acknowledgment part of this for	orm below, AND RETURN COPIES FAND to the sender
within 20 days. An envelope has been enclosed for this purpos	
YOU MUST SIGN AND DATE THE ACKNOWLEDGME corporation, unincorporated association (including a partnership relationship to that entity. If you are served on behalf of another indicate under your signature your authority.	o), or other entity, you must indicate under your signature you
If you do not complete and return copies 1 and 2 of this form behalf you are being served) may be required to pay any expensions manner permitted by law.	
If you do complete and return copies 1 and 2 of this form, you answer the complaint within 20 days for private defendants and judgment by default will be taken against you for the relief dem	/or 60 days for Federal defendants. If you fail to do so,
I declare, under penalty of perjury, that this Notice and Ackr was mailed on this date.	nowledgment of Receipt of Summons and Complaint By Mail
5/1/08 Date of Signature	Son Federics Rocks, U.S. March Signature (USMS Official) - Regular Cla
ACKNOWLEDGMENT OF RECEIPT	OF SUMMONS AND COMPLAINT
I declare, under penalty of perjury, that I received a copy of manner at:	the summons and of the complaint in the above captioned
455 Golda Gate Ave Street Number and Street Name or P.O. Box No.	Afformer in Fact Relationship to Entity/Authority to Receive
San Francisco, CA 94102	5/14/08
City State and Zip Code	Service of Process
Signature	Date of Signature

Copy 1 - Clerk of Court

Copy 2 - United States Marshals Service

Copy 3 - Addressee

Copy 4 - USMS District Suspense